

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full)

Kristi Lynn Noem

(b) Address (number and street)

PO Box 852

☐ Check if address changed

2. Identification Number

H0SD00054

(c) City, State and ZIP Code

Sioux Falls

SD

57101-0852

3. Is This Statement

☐ New (N)

OR

☒ Amended (A)

4. Party Affiliation

REPUBLICAN PARTY

5. Office Sought

House

6. State & District of Candidate

SD 00

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2012 election(s).
(year of election)

NOTE: This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full)

Kristi for Congress

(b) Address (number and street)

PO Box 852

(c) City, State and ZIP Code

Sioux Falls

SD

57101-7101

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Founders Joint Candidate Committee

(b) Address (number and street)

228 S Washington Street

Suite 115

(c) City, State and ZIP Code

Alexandria

VA

22314-5404

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct, and complete.

Signature of Candidate

Kristi Lynn Noem

Date

01/06/2011

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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